

Amendments to the Claims:

This listing of claims will replace all prior versions and listings of claims in the application:

Listing of Claims:

1 to 18. (cancelled)

19. (previously presented) A method for treating scoliosis in a subject in need thereof comprising implanting in an unmodified facet joint of the subject a spinal facet cap, said spinal facet cap comprising a shim portion and an alignment portion, such that scoliosis in the subject is treated.

20. (previously presented) The method of claim 19, wherein a spinal facet cap is implanted in each of two or more unmodified facet joints of the subject, such that scoliosis in the subject is treated.

21. (original) The method of claim 19, further comprising evaluating the subject for the number, size, shape, location, and placement of spinal facet caps required to treat scoliosis in the subject.

22. (original) The method of claim 21, wherein an imaging system is used to evaluate the subject.

23. (previously presented) The method of claim 22, wherein the imaging system is selected from computed tomography (CT), radiography, and magnetic resonance imaging (MRI).

24. (previously presented) The method of claim 19, further comprising selecting a spinal facet cap with at least one facet hook on the shim portion, said facet hook adapted to receive either one of the superior facet or the inferior facet of a vertebra.

25. (previously presented) The method of claim 19, further comprising selecting a spinal

facet cap with at least two facet hooks on the shim portion, one said facet hook adapted to receive the superior facet of a first vertebra, a second said facet hook adapted to receive the inferior facet of a second vertebra.

26. (previously presented) The method of claim 19, further comprising selecting a spinal facet cap with said alignment portion including a tongue having an orifice.

27. (previously presented) The method of claim 19, further comprising selecting a spinal facet cap with a wedge-shaped shim portion.

28. (previously presented) The method of claim 19, wherein implanting said spinal facet cap in said unmodified facet joint comprises correcting asymmetry between left and right facet joints of a vertebra.

29 to 33. (cancelled)

34. (previously presented) A method for distracting adjacent spinal facets of a healthy facet joint, comprising:

positioning a spinal facet cap having a shim portion and an alignment portion such that the shim portion is disposed between the adjacent spinal facets of the healthy facet joint; and

fixedly connecting the alignment portion with a vertebral structure associated with one of the adjacent spinal facets, but not the other of the adjacent spinal facets;

wherein mobility of the facet joint is preserved.

35. (previously presented) The method of claim 34, wherein:

the one of the adjacent spinal facets is an anchoring facet;

the shim portion includes a pin; and

positioning the spinal facet cap includes inserting the pin into the anchoring facet so that the shim portion is fixedly associated with the anchoring facet.

36. (previously presented) The method of claim 34, further comprising selecting a spinal

facet cap with said alignment portion including a tongue having an orifice.

37. (previously presented) The method of claim 34, further comprising selecting a spinal facet cap with a wedge-shaped shim portion.

38. (previously presented) A method for treating an ailment of the spine in a subject in need thereof while preserving mobility of a facet joint of the spine, comprising:

implanting in the facet joint, that is substantially or entirely intact, a spinal facet cap, said spinal facet cap comprising a shim portion and an alignment portion, such that the ailment of the spine is treated.

39. (previously presented) The method of claim 38, wherein a said spinal facet cap is implanted in each of two or more facet joints that are substantially or entirely intact.

40. (previously presented) The method of claim 38, further comprising selecting a spinal facet cap with at least one facet hook on the shim portion, said facet hook adapted to receive either one of a superior facet or an inferior facet of a vertebra.

41. (previously presented) The method of claim 38, further comprising selecting a spinal facet cap with at least two facet hooks extending from the shim portion, one said facet hook adapted to receive a superior facet of a first vertebra, and a second said facet hook adapted to receive an inferior facet of a second vertebra.

42. (previously presented) The method of claim 38, further comprising selecting a spinal facet cap with said alignment portion including a tongue having an orifice.

43. (previously presented) The method of claim 38, further comprising selecting a spinal facet cap wherein said shim is at least one of concave and convex.

44. (previously presented) The method of claim 38, further comprising selecting a spinal facet cap wherein said shim has at least one pin extending therefrom.

45. (previously presented) The method of claim 38, further comprising selecting a spinal facet cap wherein said shim has at least one boss extending therefrom.
46. (previously presented) The method of claim 38, further comprising selecting a spinal facet cap wherein said shim has at least one ridge extending therefrom.
47. (previously presented) The method of claim 38, further comprising selecting a spinal facet cap wherein said shim is substantially the shape of an articulating surface of the facet joint.
48. (previously presented) The method of claim 38, further comprising removing the facet capsule prior to the implanting of the spinal facet cap.
49. (previously presented) The method of claim 38, further comprising removing some of the ligaments associated with the facet joint prior to implanting the spinal facet cap.
50. (previously presented) The method of claim 19, further comprising selecting a spinal facet cap wherein said shim is at least one of concave and convex.
51. (previously presented) The method of claim 19, further comprising selecting a spinal facet cap wherein said shim has at least one pin extending therefrom.
52. (previously presented) The method of claim 19, further comprising selecting a spinal facet cap wherein said shim has at least one boss extending therefrom.
53. (previously presented) The method of claim 19, further comprising selecting a spinal facet cap wherein said shim has at least one ridge extending therefrom.
54. (previously presented) The method of claim 19, further comprising selecting a spinal facet cap wherein said shim is substantially the shape of an articulating surface of the facet joint.

55. (previously presented) The method of claim 19, further comprising removing the facet capsule prior to the implanting of the spinal facet cap.
56. (previously presented) The method of claim 19, further comprising removing some of the ligaments associated with the facet joint prior to implanting the spinal facet cap.
57. (previously presented) The method of claim 34, further comprising selecting a spinal facet cap wherein said shim is at least one of concave and convex.
58. (previously presented) The method of claim 34, further comprising selecting a spinal facet cap wherein said shim has at least one pin extending therefrom.
59. (previously presented) The method of claim 34, further comprising selecting a spinal facet cap wherein said shim has at least one boss extending therefrom.
60. (previously presented) The method of claim 34, further comprising selecting a spinal facet cap wherein said shim has at least one ridge extending therefrom.
61. (previously presented) The method of claim 34, further comprising selecting a spinal facet cap wherein said shim is substantially the shape of an articulating surface of the facet joint.
62. (previously presented) The method of claim 34, further comprising removing the facet capsule prior to the implanting of the spinal facet cap.
63. (previously presented) The method of claim 34, further comprising removing some of the ligaments associated with the facet joint prior to implanting the spinal facet cap.
64. (previously presented) The method of claim 19, further comprising positioning the shim adjacent to an articulation surface of a facet joint and positioning the alignment portion adjacent a vertebra outside of the articulation surface of a facet joint.

65. (previously presented) The method of claim 34, further comprising positioning the shim adjacent to an articulation surface of a facet joint and positioning the alignment portion adjacent a vertebra outside of the articulation surface of a facet joint.

66. (previously presented) The method of claim 38, further comprising positioning the shim adjacent to an articulation surface of a facet joint and positioning the alignment portion adjacent a vertebra outside of the articulation surface of a facet joint.

67. (new) The method of claim 19, wherein implanting further comprises:
positioning the shim portion between adjacent spinal facets of the facet joint; and
fixedly connecting the alignment portion with a vertebral structure associated with one of the adjacent spinal facets.

68. (new) The method of claim 38, wherein implanting further comprises:
positioning the shim portion between adjacent spinal facets of the facet joint; and
fixedly connecting the alignment portion with a vertebral structure associated with one of the adjacent spinal facets.